

Updated 3/23/88
Updated 2/28/90
Updated 4/28/93

POLICY MANUAL

State Mental Health, Mental Retardation and Substance Abuse Services Board
Department of Mental Health, Mental Retardation and Substance Abuse Services

POLICY 1015(SYS)86-22

SUBJECT: Facility and Community Services Board Services to Persons Who Have Co-occurring Mental Illness, Mental Retardation and/or Substance Abuse (MICA (Mentally Ill Chemical Abusers), SA/MH, MH/MR, SA/MR or MH/MR/SA).

AUTHORITY: Board Minutes Dated October 22, 1986
Effective Date November 19, 1986
Approved by Board Chairman s/James C. Windsor

REFERENCES: Section 37.1-10, Code of Virginia (1950) as amended.
Rules and Regulations for the Licensure of [Various Types of Programs], Department of Mental Health, Mental Retardation and Substance Abuse Services, Various Dates.
State Board Rules and Regulations to Assure the Rights of Residents of Facilities Operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services, July 1983
State Board Rules and Regulations Assuring the Rights of Clients in Community Programs, March 1986
Joint Commission on Accreditation of Hospitals (JCAH) Survey Preliminary Letter, January 9, 1986.
Preliminary Findings and Conclusions by the Joint Legislative Audit and Review Commission (JLARC), a briefing to SJR 42, Commission on Deinstitutionalization.
Substance Abuse Task Force of the Virginia Association of Community Services Boards Report, adopted October 9, 1987
Hospital--CSB Linkages Work Group, Report (July, 1990).
DMHMRSAS Comprehensive State Plan.

BACKGROUND: The co-occurrence of mental illness, mental retardation and/or substance abuse presents itself in at least 20-40% of those persons receiving services in State facilities, and in up to 60% of those receiving community-based mental health services, depending upon the nature of the service, with the highest incidence in young adults who have combinations of serious mental illness, mental retardation and/or substance abuse disorders. The Substance Abuse Advisory Council noted (in 1986) the lack of a service policy for persons with multiple impairments and recommended that the State Board develop such a policy.

PURPOSE:

To set forth the position of the State Board in regard to the responsibilities of State facilities and CSBs for ensuring, within available resources, that persons who have co-occurring mental illness, mental retardation and/or substance abuse disorders receive the services they require and to charge the Department with policy implementation.

POLICY:

It is the policy of the State Mental Health, Mental Retardation and Substance Abuse Services Board that State facilities and community services boards conduct thorough and comprehensive evaluations and assessments on any person referred for or seeking services. Such evaluations and assessments will be included for persons undergoing prescreening. State facilities and CSBs shall identify persons with co-occurring mental illness, mental retardation and/or substance abuse disorders and provide or coordinate appropriate services for such clients, within available resources. During this evaluation, special focus will be given to immediate medical care requirements. Where possible, acute medical care needs shall be met in the community.

Each community services board will ensure that its directly operated programs maintain an ongoing relationship among all disabilities. Emphasis will be directed to the provision of, or the arrangement for, those services within the disabilities that are necessary for ongoing, individualized treatment of persons with co-occurring mental illness, mental retardation and/or substance abuse disorders, and services and service plans for such consumers shall be integrated and coordinated. Community services boards' contracts with all providers should contain the stipulation that contractors will provide or coordinate, in conjunction with the community services board and/or programs, a service or set of services that will meet mental health, mental retardation and/or substance abuse needs of their clientele. The State Board encourages jointly funded programs/projects to meet the needs of persons with multiple impairments.

Services through State facilities or community services boards will not be denied to an individual based on co-occurring mental illness, mental retardation and/or substance abuse disorders. However, a State facility or community services board may restrict services to clients where the restriction is reasonably related to treatment goals (as set forth in referenced rules and regulations of the State Board as such regulations pertain to accommodating the handicapped). Services shall include comprehensive evaluations/assessments, team treatment planning and service delivery, and comprehensive discharge plans based on an ongoing evaluation of individual needs. State facilities shall admit and serve persons with multiple impairments according to Departmental admission guidelines and performance agreements. Alcohol and drug abuse education and treatment will be a component of

stabilization in the State facilities. Connection with community-based treatment services will be one major component in the predischarge planning effort.

The Department will support the development and implementation of the services for persons with multiple impairments through the annual planning process which will identify issues, needs and projections of resources. Further, the Department will provide training and information on service delivery to.

The Commissioner shall assign a staff coordinator who will develop a plan for implementation, monitoring and evaluation of this policy.